



2000 W. Sam Houston Parkway South
Suite 1700
Houston, TX 77042

APPLICATION FOR EMPLOYMENT

“An Equal Opportunity Employer” Varco International, Inc., Companies do not discriminate in employment on the basis of race, color, religion, marital status, national origin, physical handicap, sex, sexual preference, ancestry, age, or veteran status.

Please complete entire application, even if a resume is included. If a particular question is not applicable, please put N/A.

PERSONAL INFORMATION

NAME	<i>Last</i>	<i>First</i>	<i>Middle Initial</i>
ADDRESS	<i>Street & Number</i>	<i>City</i>	<i>State</i> <i>Zip Code</i>
TELEPHONE NUMBER - HOME	WORK	SOCIAL SECURITY NUMBER	Are you at least 18 yrs. of age?
YES <input type="checkbox"/>	NO <input type="checkbox"/>		
IN CASE OF EMERGENCY CONTACT	<i>First Name</i>	<i>Last Name</i>	<i>Relationship</i>
ADDRESS	<i>Street & Number</i>	<i>City</i>	<i>State</i> <i>All Phone No.(s)</i>

JOB INTEREST

POSITION DESIRED	SALARY REQUIREMENT	Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>
HAVE YOU BEEN PREVIOUSLY EMPLOYED BY VARCO?	YES <input type="checkbox"/>	NO	IF YES, WHERE & WHEN
ARE YOU ACQUAINTED WITH OR RELATED TO A VARCO EMPLOYEE?	YES <input type="checkbox"/>	NO	
IF YES, PLEASE NAME:			
HOW WERE YOU REFERRED TO US?			
Employee <input type="checkbox"/>	Newspaper <input type="checkbox"/>	Placement/Temporary Agency	Walk-in <input type="checkbox"/>
University <input type="checkbox"/>	Other <input type="checkbox"/> Please Specify: _____		

EDUCATION

CIRCLE HIGHEST GRADE COMPLETED IN EACH SCHOOL CATEGORY	GRADE SCHOOL								HIGH SCHOOL				COLLEGE				GRADUATE SCHOOL							
	1	2	3	4	5	6	7	8	1	2	3	4	1	2	3	4	1	2	3	4				
SCHOOLS ATTENDED	CITY & STATE								GRADUATED YES NO				MAIN COURSE OF STUDY				GPA				DIPLOMA/DEGREE			
HIGH SCHOOL																								
COLLEGE (ARE YOU CURRENTLY ENROLLED?) YES <input type="checkbox"/> NO X																								
BUSINESS TECHNICAL OR GRADUATE SCHOOL																								
ADDITIONAL COURSES SEMINARS TAKEN: \\																								

EMPLOYMENT HISTORY

List present employer or most recent employer first. May we contact these employers? YES NO

Employer	Employed		Supervisor's Name
Address	From		Your Title
Telephone	To		
Your Salary		Duties	
Start	End	•	
Reason for Leaving: .			

Employer	Employed		Supervisor's Name
Address	From	Mo/Yr.	Your Title
Telephone	To:	___ Mo/Yr.	
Your Salary		Duties	
Start	End		
Reason for Leaving:			

Employer	Employed		Supervisor's Name
Address	From	Mo/Yr.	Your Title
Telephone	To	Mo/Yr.	
Your Salary		Duties	
Start	End		
\$	\$		
Reason for Leaving:			

Employer	Employed		Supervisor's Name
Address	From	Mo/Yr.	Your Title
Telephone	To	Mo/Yr.	
Your Salary		Duties	
Start	End		

Are you legally authorized to work in the U.S.? YES NO (Proof of Citizenship/Immization status is required upon employment)

Were you in the U.S. Armed Forces? YES NO If yes, what branch? _____

Dates of duty: From: _____ to _____ Type of Discharge _____

GENERAL JOB RELATED INFORMATION

What hours/days are you available for work? _____

Are you able to work overtime or on weekends on short notice? YES NO

What date will you be available to work? Immediately _____

What languages do you fluently speak? _____ read? _____ write? _____

Are you able to perform the essential functions of the position for which you are applying? YES NO

Have you ever been convicted of a felony or misdemeanor, pled guilty, received deferred adjudication, or had a conviction set aside or dismissed in a criminal or civil court matter (including DWI or traffic offense other than non-injury traffic or parking)? YES NO Such a conviction may be relevant if job related but does not bar you from employment. If yes, explain all occurrences in detail _____

Have you ever been refused a bond or had one cancelled? YES NO

Please explain: _____

List any litigation, legal dispute or claims in which you have been involved (lawsuits or claims against any person or corporation) and disposition of same _____

(No applicant will be denied employment solely on the grounds of a prior conviction. The nature of the crime, the surrounding circumstances and the relevance of the offense to the position applied will be considered).

Are you willing to undergo a pre-employment physical exam and a drug & alcohol screen? YES NO

WORK RELATED OR PROFESSIONAL REFERENCES

May we contact your current employer? YES NO

Name & Address	Occupation	Phone Number

ADDITIONAL INFORMATION

Please include any other information you think would be helpful to us in considering you for employment, such as additional work experience, articles/books published, activities, accomplishments, etc. (You may exclude all information indicative of race, color, religion, marital status, national origin, physical handicap, sex, sexual preference, ancestry, age or veteran status).



SPECIAL QUESTIONS

Do not answer any of the questions in this section unless the employer has indicated the information is required for a bona fide occupational qualification, or dictated by federal or state regulations, or is needed for legally permissible reasons.

Date of Birth _____ Driver’s License # _____ State Issuing _____ Type _____

PRE-EMPLOYMENT STATEMENTS

Initial “I understand that nothing contained in this Application For Employment or in any other Company document or statement is intended to create, nor does it create, a contract between the Company and myself for either employment or the provision of any compensation or benefits. I understand that if employed, I have the right to terminate my employment at any time, for any reason, and likewise, the Company has the same right. I understand that my employment may be terminated at any time with or without cause and with or without notice at the option of the company.”

Initial “I understand that the Company absolutely prohibits the possession, sale, purchase, or use of alcohol, illegal drugs, or unauthorized substances, drug related paraphernalia, firearms, explosives, dangerous weapons, and other contraband in facilities or on the property owned, controlled, or operated by the Company. Additionally, the Company strictly prohibits the reporting to or remaining at work under the influence of alcohol or having used other prohibited substances outlined in the Company’s practice, regardless of when or where the substance entered the employee’s system”.

Initial “I understand that the Company has the right to search anything brought onto company premises including vehicles, tool boxes, desks, lockers, handbags, and briefcases.

Initial “If offered a position with the Company, I understand that a pre-employment physical, including a drug test, will be administered, and my employment will be contingent upon satisfactory results. If employed, I will be expected to enter into and adhere to the Company Drug & Alcohol Practice which subjects me to periodic mandatory random drug & alcohol testing.”

Initial “I understand the company benefits and rules and regulations may be changed, modified, deleted or added to by the company at any time at the company’s sole option and without prior notice, and if employed, I will comply with all Company practices, rules, regulations, and directives as may be established from time to time.”

Initial “I grant the Company the right to obtain, from the references I have listed, any and all information concerning my work history. I hereby request said references to make any such information available to the Company, and agree to hold said parties harmless in connection with any investigation.”

Initial “I understand that no representative of the Company has the authority to enter into any agreement for employment for any specified period of time, to make commitments or promises of benefit terms and conditions of employment, unless such are made in writing and signed by the corporate president or it’s designee.”

Initial “I understand that this application will remain active for no more than 3 months.”

I certify that to the best of my knowledge the foregoing information given by me is true. I understand that any misrepresentation, falsification or omission by me herein will be cause for my rejection for employment, or if hired, may subsequently subject me to dismissal. I also authorize any investigation of the enclosed information for purposes of verification and agree to hold the Company harmless in connection with it’s investigation.

Applicant’s Signature _____ Date

(This Application will not be considered valid unless fully completed and signed)